

SERIAL NUMBER 09/312,302		FILING DATE 05/14/99	CLASS 712	GROUP ART UNIT 2784	ATTORNEY DOCKET NO. P3803											
APPLICANT	MARIO D. NEMIROVSKY, SARATOGA, CA; ADOLFO M. NEMIROVSKY, SAN JOSE, CA; NERENDRA SANKAR, SANTA CLARA, CA.															
	<p>**CONTINUING DOMESTIC DATA*****</p> <p>VERIFIED THIS APPLN IS A CIP OF 09/216,017 12/16/98 AND A CIP OF 09/240,012 01/29/99 AND A CIP OF 09/273,810 03/22/99</p> <p><i>Stephen Peter</i> 2731 2731</p>															
	<p>**371 (NAT'L STAGE) DATA*****</p> <p>VERIFIED</p>															
ADDRESS	<p>**FOREIGN APPLICATIONS*****</p> <p>VERIFIED</p>															
	IF REQUIRED, FOREIGN FILING LICENSE GRANTED 06/04/99 ** SMALL ENTITY **															
	<table border="1"><tr><td>Foreign Priority claimed 35 USC 119 (a-d) conditions met</td><td><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no</td><td>STATE OR COUNTRY CA</td><td>SHEETS DRAWING 7</td><td>TOTAL CLAIMS 42</td><td>INDEPENDENT CLAIMS 3</td></tr><tr><td>Verified and Acknowledged</td><td>Examiner's Initials</td><td>Initials</td><td></td><td></td><td></td></tr></table>					Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 7	TOTAL CLAIMS 42	INDEPENDENT CLAIMS 3	Verified and Acknowledged	Examiner's Initials	Initials		
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Verified and Acknowledged	Examiner's Initials	Initials														
DONALD R BOYS P O BOX 187 AROMAS CA 95004																
TITLE	INTERRUPT AND EXCEPTION HANDLING FOR MULTI-STREAMING DIGITAL PROCESSORS															
FILING FEE RECEIVED \$578	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit													